

**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:

Peter M. Killcommons

Application No.: 09/491,459

Filed: January 26, 2000

For: SECURE NETWORK SYSTEM AND

METHOD FOR TRANSFER OF MEDICAL INFORMATION

Date of Allowance: November 10, 2004

Confirmation No.: 8553

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA

Examiner: Moise, Emmanuel Lionel

22313-1450.

on Flbruary 9 2005

Art Unit: 2136

Christopher P. Marshall
Name of Person Mailing Correspondence

2 9 2005
Signature
Date

## INFORMATION DISCLOSURE STATEMENT

Sir:

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Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: February 9, 2005

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	INIEOE	N / N	TION DISCLOSUR	Application Number	09/491,459					
			<i>-</i>	Filing Date	January 26, 2000					
	STATE	EME	ENT BY APPLICAN	First Named Inventor:	Peter M. Killcommons					
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			N. C.	Examiner Name	Moise, Emmanuel Lionel					
Sheet	1		of	& TRADEMARY EST	Attorney Docket Number	60531P002				
U.S. PATENT DOCUMENTS										
Examiner Initials*	Cite No. <sup>1</sup>	Numl	Document Number ber-Kind Code <sup>2</sup> (If known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear				
		US-	6,434,996 B1	07/23/2002	Killcommons et al.					
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FOREIGN PATENT DOCUMENTS											
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document  Country Code <sup>3</sup> Number <sup>4</sup> Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T⁵					

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